

## UNIVERSITY HOSPITALS DORSET NHS FOUNDATION TRUST

### PEOPLE & CULTURE COMMITTEE ANNUAL REPORT 2022/23

#### 1 PURPOSE OF THE REPORT

- 1.1 The People & Culture Committee<sup>1</sup> (the “Committee”) has prepared this report for the Board of Directors. It sets out how the Committee satisfied its terms of between 1 April 2022 and 31 March 2023. The Committee seeks to provide the Board with evidence that it has met its responsibilities as set out in its terms of reference during the relevant period. The Committee’s terms of reference were reviewed and updated in January 2023<sup>2</sup>.

#### 2 MEETINGS

- 2.1 Six formal meetings were held during the year, all of which were quorate:

- Wednesday 20 April 2022
- Wednesday 15 June 2022
- Wednesday 17 August 2022
- Wednesday 19 October 2022
- Wednesday 14 December 2022
- Wednesday 8 February 2023

- 2.2 Meeting attendance is detailed in **Appendix 1**.

#### 3 MEMBERSHIP

- 3.1 Membership of the Committee comprises three Non-Executive Directors, the Chief People Officer, the Chief Medical Officer, the Chief Nursing Officer and the Chief Operating Officer.

Membership of the Committee in 2022/23 comprised of:

- Cliff Shearman, Non-Executive Director and Chair (*until 31 December 2022*)
- Pankaj Davé, Non-Executive Director and Chair (*from 1 January 2023*)
- Karen Allman, Chief People Officer
- Philip Green, Non-Executive Director (*from 1 January 2023*)
- Fiona Hoskins, Acting Chief Nursing Officer (*from 1 April 2022 to 31 May 2022*)
- Mark Mould, Chief Operating Officer
- Stephen Mount, Non-Executive Director (*until 31 December 2022*)
- Alyson O'Donnell, Chief Medical Officer (*Ruth Williamson Acting Chief Medical Officer from 1 August 2022*)
- Paula Shobbrook, Chief Nursing Officer (*from 1 June 2022*)
- Caroline Tapster, Non-Executive Director

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<sup>1</sup> Workforce Strategy Committee prior to January 2023.

<sup>2</sup> This self-assessment has been prepared against the Committee’s terms of reference in effect from 25 January 2023 (notwithstanding that during part of the period under consideration, the previous terms of reference applied).

## 4 COMPLIANCE WITH TERMS OF REFERENCE

- 4.1 A review of the Committee's compliance with its own terms of reference was undertaken (by the Company Secretary Team to support the Committee) in April 2023 by scrutinising the agendas and minutes of the six Committee meetings which took place between 1 April 2022 and 31 March 2023. This evidences how the Committee has discharged each of its responsibilities:

- 4.1.1 **To receive confirmation from the Board, on an annual basis, of the relevant breakthrough objectives and the relevant strategic initiatives which are to be held to account by the Committee.**

This was a new addition to the Committee's terms of reference in January 2023. These objectives will be confirmed to the Committee following the finalisation of the 2023-24 annual objectives.

- 4.1.2 **To obtain assurance that the relevant breakthrough objectives and strategic initiatives for which the Board has delegated responsibility for oversight to the Committee, are being delivered effectively through monitoring progress, appropriate challenge and escalating to the Board when required.**

The Committee will begin this following confirmation of the objectives and strategic initiatives for which the Board has delegated responsibility for oversight to the Committee for 2023-24.

- 4.1.3 **To regularly review the Board Assurance Framework (including through in-depth review of specific risks) and to ensure that it reflects the assurances for which the Committee has oversight, with risks highlighted being appropriately reflected on the risk registers. This shall include, but not be limited to the Committee acting in accordance with Board approved risk appetite and risk tolerance levels when reviewing risks.**

The Committee did not review the Board Assurance Framework (this being included within both its previous and new terms of reference) but did review the risk register at each meeting.

- 4.1.4 **To review the Trust's significant risks report and receive updates on directorate workforce risk issues, action plans or unresolved matters/concerns for escalation.**

The Committee reviewed at each meeting risks rated 8-25 relating to workforce and organisational development. At each meeting the Committee received updates from each of the Care Groups, including risks and escalations to the Committee.

- 4.1.5 **To review reports from the Guardian of Safe Working and Freedom to Speak Up Guardian as well as Safe Staffing reviews.**

The Committee received:

- Quarterly Guardian of Safe Working Hours Report;
- Quarterly Freedom to Speak Up Report;
- Bi-annual Nursing Establishment Review.

In addition, the Committee received a maternity safe staffing report in December 2022.

- 4.1.6 To consider reports on national and local surveys including the staff survey and GMC survey as they relate to workforce, monitoring the implementation of actions agreed to be taken to address areas of concern identified.**

The Committee received a report on the 2021 staff survey in April 2022. An update on the 2022 staff survey, particularly the ongoing engagement campaign to improve completion rates, was provided in October 2022.

A report on the GMC survey was received in October 2022.

- 4.1.7 To obtain assurance that appropriate feedback mechanisms are in place for those raising incidents and that a culture of openness and transparency in respect of incident reporting is encouraged by supporting the Speaking Up agenda.**

The Committee received a quarterly report from the Freedom to Speak Up Guardian.

- 4.1.8 To oversee and monitor the implementation of the Equality, Diversity and Inclusion strategy.**

The Committee received a quarterly report on Equality, Diversity & Inclusion, including progress against the strategy.

- 4.1.9 To obtain assurance in relation to the Trust's security management - violence prevention and reduction strategy.**

In 2022, the annual security report was presented to the Health & Safety Group (a sub-group of the Quality Committee) and the Board of Directors in July 2022.

- 4.1.10 To oversee the development by the Trust of an effective staff structure and workforce operating model across the organisation.**

At each meeting the Committee received:

- A report from the Chief People Officer, Chief Medical Officer and Chief Nursing Officer;
- Updates from each of the Care Groups.

In April 2022, the Committee additionally received a report on the workforce planning framework.

- 4.1.11 To monitor delivery of staff engagement plans to ensure there are clear communication channels across the organisation which provide staff with key information during the transformation of services.**

*This was not within the terms of reference of the Committee for the majority of the period in question.*

- 4.1.12 To monitor organisational integration and cultural development and the implementation of action plans as necessary.**

The Committee received an update on the cultural maturity action plan in February 2023.

**4.1.13 To receive reporting relating to changes in Professional Education and Essential Core Skills training to ensure compliance and continued provision of high-quality care.**

The Committee received a quarterly report on Education & Training which included compliance. These metrics were also referenced in the Chief Officer's reports.

**4.1.14 To monitor the provision of training and development and implementation of solutions which deliver a skilled, flexible modernised workforce improving productivity, performance and reducing health inequalities.**

The Committee received a quarterly report on Education & Training.

*However, it should be noted that this was not within the terms of reference of the Committee for the majority of the period in question.*

**4.1.15 To obtain assurance that effective performance management systems are in place in support of delivery by the Trust of improving capability and capacity to provide high quality, safe patient care.**

Appraisal performance was reported to the Committee through the Chief Officer's and Care Group reports.

**4.1.16 To monitor major workforce transformation programmes, including to obtain assurance that no such programme has an unforeseen adverse impact on workforce or on the performance of the Trust.**

*This was not within the terms of reference of the Committee for the majority of the period in question. However, under its previous terms of reference, the Committee was "to monitor the implications of the Clinical Services Review, Cost Improvement Plans and major service changes". In addition, the Committee was "to scrutinise and make comment to the Board of Directors on the long-term strategic workforce plans".*

**4.1.17 To receive and monitor workforce indicators including recruitment, retention/turnover, sickness, appraisals and training.**

The Committee received and monitored these indicators at each meeting through the Chief People Officer's Report.

**4.1.18 To oversee and monitor progress against national NHS England workforce standards and reporting including the Workforce Race Equality Standard (WRES) and Workforce Disability Equality Standard (WDES).**

The Committee reviewed the annual WRES and WDES reports in August 2022.

**4.1.19 To review the Trust's Equality and Diversity Monitoring Report.**

The Committee received and reviewed a quarterly report on Equality, Diversity & Inclusion.

**4.1.20 To review the Gender Pay Gap Report.**

The Committee reviewed the Gender Pay Gap Report in April 2022.

**4.1.21 To review the annual consultant revalidation report.**

The Committee reviewed the annual consultant revalidation report in June 2022.

**4.1.22 To receive and review relevant reports of or relating to the Dorset integrated care system and provider collaborative.**

This is a new responsibility added to the terms of reference in January 2023. As such, no such reports were received during the period.

4.2 The Committee approved the continuation of its existing governance cycle in October 2022 pending the completion of the Trust's wider review of Board and Committee governance.

4.3 The Committee's terms of reference specify that unless otherwise agreed by the Committee Chair, the papers should be circulated not less than 5 working days in advance of the meeting. There were a number of occasions during the year when reports were received late.

## **5 CONCLUSION**

5.1 The Committee considers that it has discharged its responsibilities as set out in its terms of reference, save as noted above (particularly 4.1.3 and 4.1.16) and recognising that new terms of reference were adopted in January 2023.

5.2 Work is underway to map the Committee's new terms of reference, against the reporting requirements, to produce a new governance cycle incorporating the Committee's responsibilities.

**Pankaj Davé**  
**Chair, People & Culture Committee**  
**May 2023**

## Appendix 1 – Attendance at People & Culture Committee 2022/23

People & Culture Committee		20-Apr-22	15-Jun-22	17-Aug-22	19-Oct-22	14-Dec-22	08-Feb-23
Present	Karen Allman		D				
	Pankaj Davé						
	Philip Green						
	Fiona Hoskins						
	Mark Mould	A					
	Stephen Mount						
	Alyson O'Donnell		D				
	Cliff Shearman						
	Paula Shobbrook		D		D		
	Caroline Tapster					A	
	Ruth Williamson			A	D		
In attendance	Marie Cleary						
	Abigail Daughters						
	James Donald						
	Yasmin Dossabhoy						
	Paul Froggatt						
	Ewan Gauvin						
	Jon Harding						
	Siobhan Harrington						
	Fiona Hoskins						
	Gaynor Hurst						
	Carla Jones						
	Darren Jose						
	Deborah Lane						
	Alex Lister						
	Sarah Locke						
	Sarah Macklin						
	Deb Matthews						
	Irene Mardon						
	Helen Martin						
	Lisa McManus						
	Bridie Moore						
	Debbie Robinson						
	Matt Thomas						
	Amanda Weaver						
	Rob Whiteman						
	Sandy Wilson						
Was the meeting quorate? Y/N		Y	Y	Y	Y	Y	Y

### Key

	Not in Attendance
A	Apologies
D	Delegate Sent
	In attendance
	N/A